

prohibition on representing, aiding or advising foreign interests, including commercial interests, before the Government of the United States. It is not enough just to shut the gym to former Members who are lobbyists. You have to get at the heart of the problem.

Campaign finance authority Herbert Alexander estimated that \$540 million was spent during the 1976 period on all elections in the United States. By 2000, that figure had risen to over \$4 billion. To run for this job in the House in 1976 cost on average \$87,000. Today, the average Member has to spend nearly \$1 million, and some \$2 million, 10 times what was spent just 30 years ago, and the population hasn't gone up by 10 times.

A winning Senate race back in 1976, you could spend about half a million dollars, which is a lot of money where I come from. Today, the average amount spent is over \$5 million; and in places like New York, that is chicken feed.

Mr. Speaker, we have become a plutocracy. America, wake up. Please support real reform for our children and grandchildren.

A MODERN ECONOMY NEEDS MODERN STATISTICS

The SPEAKER pro tempore (Mr. WESTMORELAND). Under a previous order of the House, the gentleman from California (Mr. DREIER) is recognized for 5 minutes.

Mr. DREIER. Mr. Speaker, today's job seekers have a vast technological arsenal at their disposal. They can search online for job openings. They can e-mail their contact of networks for leads. They can fax their resumes and conduct job interviews via video conferencing. And if they get enough of the rat race, they can start their own business. That is what goes on today, becoming their own boss.

This dynamic, technologically advanced picture of the American workforce is fundamentally different from that that existed in the late 1930s and 1940s. At that time, most workers typically had lifelong employment in long-established companies. And heavy industrial manufacturers were among the most common employers.

In six and a half decades, Americans have experienced a sea change in how we look for work, where we work, and how often we find new work. We have progressed into a wired, upwardly mobile, flexible workforce. Small business, self-employment, and independent contracting have become the hallmarks of our entrepreneurial innovation-driven economy.

With such a drastic transformation, you would expect the way we measure employment would have evolved too. Yet our most frequently cited survey of job creation remains mired in a Depression-era mindset and research method. The Bureau of Labor Statistics' payroll survey tracks payroll employment by surveying established

businesses. This results in monthly job creation numbers. The household survey, on the other hand, tracks employment by household and produces the unemployment rate from that.

While the household survey tracks all types of employment, from someone who holds a lifelong job at a big business to someone who just became their own boss, the public and private sectors have historically relied on the payroll survey to gauge national job growth. When we look back to the pre-World War II economy, favoring the payroll survey makes sense.

Today, however, Mr. Speaker, the employment landscape is entirely different. Just look at the area I represent in Southern California, with its biotechnology facilities, independent IT contractors and small, specialized consulting firms. Yesterday's start-up is today's big business, and today's brainstorm is tomorrow's start-up. It is not surprising then that the payroll and household numbers portray quite different results.

The disparity between the job survey became particularly apparent throughout the early stages of the post-recession recovery that we enjoyed in 2002 and 2003. While the payroll survey lagged for months, the household survey demonstrated a strong and growing workforce, where self-employment accounted for one-third of all the new job creation that we saw.

Following the end of the recession in November of 2001, job creation in the household survey rebounded by the following May. Although there were some ups and downs in the ensuing months, the household job numbers never again dipped below the November 2001 level. By November of 2003, more than 2.2 million net new jobs had been created, and the pre-recession job numbers had been surpassed.

By contrast, the payroll survey did not demonstrate net job growth until August of 2003 and did not return to the November 2001 level until April of 2004, nearly 2 years after the household survey had caught up. And the payroll survey's pre-recession job numbers were not surpassed until February of 2005, a year ago. This prolonged lag in the payroll survey's job creation numbers led to claims, and you will recall this, of the "jobless recovery."

Mr. Speaker, while every other major indicator of economic strength surged forward, from the gross domestic product numbers to productivity, the payroll survey persisted as an anomaly of negative news.

Only the household survey was able to accurately portray the strength of our workforce because of its ability to track the nontraditional employment that the payroll survey misses. In an already-dynamic economy, the increased churn created by economic expansion only highlighted the growing inadequacies of a Depression-era payroll survey. Using the 20th century methods to take a snapshot of the 21st century employment picture simply did not work.

To launch an overhaul of our job surveys, I introduced H. Res. 14, which called on the Bureau of Labor Statistics to review and modernize the way we collect our jobs data. BLS conducted a report that analyzed the two surveys and evaluated options for change. While the report stopped far short of proposing a complete reform of the surveys, it did acknowledge that a growing discrepancy exists between the two numbers and determined that further analysis is necessary.

Mr. Speaker, I am pleased that BLS has taken this very important first step. But it is only a first step. We must continue to push for reform so that our job surveys effectively track job creation. After all, policymakers rely on accurate economic data to draft effective legislation, and businesses need the right numbers to plan for their future. In an economy where the only constant is change, unreliable numbers will result in off-target legislation and poor business decisions.

A modern economy needs modern statistics, and we must make sure that we give it that.

U.S.-INDIA NUCLEAR COOPERATION DEAL

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Jersey (Mr. PALLONE) is recognized for 5 minutes.

Mr. PALLONE. Mr. Speaker, I am always pleased to lend my personal support to strengthening the partnership between India and the United States, and today I rise to express my support for the recent civil nuclear energy cooperation agreement between the world's two largest democracies. I also urge my colleagues to support such an agreement when it comes under consideration in Congress.

Based on their shared values of diversity, democracy and prosperity, the United States and India have a natural connection. The growing bilateral relationship between the United States and India is creating new and profound opportunities between our two countries. We have shared democratic values and national interests that have fostered a transformed relationship that is central to the future success of the international community, and that includes the global war on terrorism and slowing the spread of weapons of mass destruction. Building this strategic partnership was unforeseen a few years ago, but its success is important in creating a strong democratic foundation in Asia.

Mr. Speaker, India, which has long been a victim of terrorism, was the first to offer its services to the United States in its war on terrorism in Afghanistan. The Bush administration has made separation of India's military and civilian nuclear facilities an important benchmark by which to judge India's seriousness. In separating these facilities and placing the civilian ones

under safeguards, it shows India's commitment to its role in the global community.

Mr. Speaker, the United States-India civil nuclear agreement strengthens energy security for both the United States and India and promotes the development of stable and efficient energy markets in India to ensure adequate and affordable supplies. Development and expansion of U.S.-India civil nuclear cooperation should, over time, lessen India's dependence on imported hydrocarbons, including those from Iran.

Mr. Speaker, India is taking necessary steps to build its relationship with the international community. Although India has never been a signatory of the Nuclear Nonproliferation Treaty, it should not be considered as a problem state with regard to nonproliferation issues. It has no record of proliferating dual-use nuclear technology to other countries. India understands the danger of the proliferation of weapons of mass destruction and has agreed to key international nonproliferation requirements.

Finally, Mr. Speaker, once the Bush administration outlines the details of the civil nuclear energy cooperation agreement, then Congress must begin steps to enact the changes necessary for implementation, and I would urge all my colleagues on a bipartisan basis to move in that direction and support it. The United States has established a remarkable strategic partnership with India, and a civil nuclear cooperation would be a great accomplishment. Its implementation is important for national security and for U.S.-India relations. Our two nations have made extraordinary progress over the last several years, and the path that lies ahead is critical to our improving relationship.

HEALTH CARE TRANSPARENCY

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. BURGESS) is recognized for 5 minutes.

Mr. BURGESS. Mr. Speaker, Americans, American patients, are fortunate. They have access to the greatest health care system in the world. But for many, the cost to access that care is prohibitively high. So it is ironic, Mr. Speaker, that the world's largest free market economy, government control and lack of true market forces have led to diminished sophistication among medical consumers and increased health care costs.

Dr. Uwe Reinhardt, a professor of political economy at Princeton University, frames the problem by stating: "To move from the present chaotic pricing system toward a more streamlined system that could support genuinely consumer-directed health care will be an awesome challenge. Yet without major changes in the present chaos, forcing sick and anxious people to shop around blindfolded for cost-effec-

tive care mocks the very idea of consumer-directed care."

A lack of transparency has created a system where customers don't have the ability to hold providers accountable. We have reached a point where even doctors and nurses and other providers have difficulty in being cost conscious, because nobody really knows what anything costs any more. In a system like this, cost increases are a given.

Mr. Speaker, there is no bigger proponent of medical health savings accounts than myself. A little less than 10 years ago when the Archer Medical Savings Accounts were first made available, I went out and got one. I think it is a good method of providing health insurance, particularly for those young Americans who want to be entrepreneurs that Chairman DREIER was just talking about. But right now there is a problem, because there is a lack of transparency in the system; and that opacity in the system prevents them from being good consumers.

A more transparent pricing system would help give providers and patients more control over their health care dollar, but there are great incentives for providers to keep consumers blindfolded. For instance, every year hospitals normally raise their price list for services. Because hospitals can increase their net revenue by raising their list prices, this provides them the incentive to increase their list prices.

But hospitals also negotiate a discount in payments for patients covered by certain health plans, and these discounted amounts are not always available to individuals who may be interested in self-pay, such as the holder of a health savings account.

Additional breakdowns of hospital operating costs and how that impacts billings would be essential information to a consumer trying to select the lowest-cost provider. Since this information is obscured, the consumer can exert no pressure on a hospital to implement rational pricing structure.

What happens when pricing information becomes available to consumers? The results can be dramatic. When the Medicare prescription drug discount card was introduced in 2004, seniors could log on to Medicare.gov and see cost comparisons of what drugs cost at area pharmacies. I would submit that Lasik surgery and plastic surgery are the other such examples when transparency is brought to the marketplace.

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Some health plans are getting into the transparency game. Aetna health plan has initiated a pilot project in Cincinnati, Ohio, that gives enrollees information on what doctors charge and gives enrollees the ability to take action before services are performed. This type of information is vital to hold providers and plans accountable for what they charge and what the patient pays.

Giving new consumer-based coverage options like health savings accounts

the opportunity to plug into a fully transparent system, it gives consumers information on cost, price and quality and would transform the American health care system in a radical manner, providing care for more Americans both rich and poor. Patients with portable health care dollars that can be paid at the point of service are extremely attractive to most health care providers who otherwise normally have to wait for an insurance company to process a claim and remit the payment sometimes months or even years after a service has been rendered. To attract the business of these patients who are willing to pay cash at the time of delivery, providers could list their charges, competing for business on price and quality.

With nearly 3 million now enrolled in health savings accounts to date and the number growing daily, health care providers and hospitals would be wise to allow transparency to pervade the system and ride the coming consumer wave.

Now, Congress can play a role in leveling the playing field in favor of the health care consumer. HSAs should be supported or made more attractive to consumers by increasing their portability and maximizing the tax benefits of these accounts. Congress has already established several quality reporting programs that are available to the public. The same should go for medical costs. There is no reason to continue the system of opacity in medical pricing.

Congress should take the lead in developing a collaborative approach with all provider stakeholders to make the costs more transparent to consumers.

The Greek dramatist Sophocles said that, "wisdom outweighs any wealth." The American health care system needs a healthy dose of wisdom; and consumers can deliver, given the chance.

MISSED OPPORTUNITIES

The SPEAKER pro tempore (Mr. MARCHANT). Under a previous order of the House, the gentleman from Texas (Mr. GENE GREEN) is recognized for 5 minutes.

Mr. GENE GREEN of Texas. Mr. Speaker, the President gave the annual State of the Union speech and also released his budget recently. The speech and the budget were short on many important issues that face our families and neighbors every day.

I was glad he talked about supporting our troops; and I agree. However, I did not hear a call for creation of additional divisions to give our regular military and reserves more time at home between deployments. He announced no plans to stop extending the enlistments for the young men and women serving our country, some of whom are serving their third tours in the Middle East.

We also need better equipment and training for the people who volunteer